

| POSITION                  | INITIALS     | ID NO.          | DATE           |
|---------------------------|--------------|-----------------|----------------|
| FEE DETERMINATION         | <i>CJ</i>    | <i>00000000</i> | <i>3/10/08</i> |
| O.I.P.E. CLASSIFIER       | <i>CLIPS</i> | <i>10016</i>    | <i>7/5/08</i>  |
| FORMALITY REVIEW          | <i>TAWB</i>  | <i>10916</i>    | <i>5-10-08</i> |
| RESPONSE FORMALITY REVIEW |              |                 | <i>6-30-08</i> |

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim      | Date     |
|------------|----------|
| Final      |          |
| Original   |          |
| 1 ✓ ✓ ✓ ✓  | 03/27/08 |
| 2 ✓ ✓ ✓ ✓  | 04/01/08 |
| 3 ✓ ✓ ✓ ✓  | 05/01/08 |
| 4 ✓ ✓ ✓ ✓  |          |
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If more than 150 claims or 10 actions  
staple additional sheet here

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